| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 | | | | | | | | | Application or Docket Number | | | |
|--|--|---|--------------------|---------------|-----------------------|--|---------|----------------------------|------------------------------|----|---------------|------------------------|
| CLAIMS AS FILED - PART I SMALL EN (Column 1) (Column 2) | | | | | | | | OTHER THAN OR SMALL ENTITY | | | | |
| U.S. NATIONAL STAGE FEES | | | (Goldini -) | | <u> </u> | | 7 | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | 300 | | | ······································ | 7 | BASIC FEE | | OR | BASIC FEE | 30 |
| EXAMINATION FEE | | | 200 | | | | 1 | EXAM. FEE | | | EXAM. FEE | 30 |
| SEARCH FEE | | | 400 | | | ******** | 1 | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | - minus 100 = | | | / 50 = | 1 | X \$ 125 = | | • | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 9 m | inus 20 = | * | | | X \$ 25 = | | OR | X \$ 50 = | |
| INDEPENDENT CLAIMS | | | 1 . | ninus 3 = | * | | 1 | X \$ 100 = | | OR | X \$ 200 = | |
| MULTIPLE DEPENDENT CLAIM PRE | | | ESENT | | | | 1 | + \$ 180 = | | OR | + \$ 360 = | |
| If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL - | 900 |
| | | (Column 1) CLAIMS REMAINING | AMENDED | (Colu | mn 2) IEST IBER | (Column 3) PRESENT | 7 | SMALL E | NTITY ADDI- TIONAL | OR | OTHER SMALL E | |
| AMENDMENT A | 9 | AFTER AMENDMENT | | PAID | | EXTRA | 4 | | FEE | | | FEE |
| | Total | <u> </u> | Minus | 1 2 | | = 0 | ┦ | X \$ 25 = | | OR | X \$ 50 = | <u>-</u> |
| AM | Independent | * | Minus | <u>ق</u> ···· | | <u> </u> | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | |] | + \$ 180 = | | OR | + \$ 360 = | |
| TOTAL ADDIT. OR TOTAL ADDIT. FFF OR TOTAL ADDIT. FFF (Column 2) (Column 3) | | | | | | | | | | | | |
| 윘 | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH | IEST BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | · | RATE | ADDI- TIONAL FEE |
| | Total | * 4 | Minus | -2 | 0 | = <i>O</i> | | X \$ 25 = | | OR | X \$ 50 = | 7 |
| | Independent | . 0 | Minus | 2 | ` | - O | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESE | ENTATION OF M | JLTIPLE DEPI | ENDENT | CLAIM | | | +\$ 180 = | | OR | + \$ 360 = | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". | | | | | | | | | | | | |
| | The "Highest Num | ber Previously Paid | For' (Total or Ind | lependent) | is the hig | hest number foun | d in th | e appropriate box | in column | 1, | | |

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